	oadband Price Offerings lection Form	FCGFprm481 OMB(control(NO) 3060-0986/OMB Control(No) 3060-0819 (UI)/2013
<010>	Study Area Code	429025
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster

<035> Contact Telephone Number - Number of person identified in data line <030> 913-762-6107

<039> Contact Email Address - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com

State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowand Action Taken Wh Limit Reached (se
			•					
		Se	e attached					
	· · · · · · · · · · · · · · · · · · ·		sheet					
							Secretary of the second	
			<u>,</u>					
		<u> </u>						
		 		 				

Data Col	erating Companies lection Form			FCCForm481 OMB/ControllNo, 3060-0986/OMB/Contro July2013	(No. 3060-0819).
<010>	Study Area Code	429025	· · · · · · · · · · · · · · · · · · ·		
<015>	Study Area Name	Virgin Mobile USA L	.P		
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster		- Committee of the Comm	
<035>	Contact Telephone Number - Number of person identified in data lin	e <030> 913-762-6107			
<039>	Contact Email Address - Email Address of person identified in data lin	e <030> andy.m.lancaster@	sprint.com		
<810>	Reporting Carrier Virgin Mobile USA LP				
<811>	Holding Company Sprint Corporation				
<812>	Operating Company				
<813>		i i i i i i i i i i i i i i i i i i i	/ <a2></a2>	₹ 3 35.5	
	Affiliates		5AC	Doing Business As Company or Brand Designation	
		See att	ached works	heet	
			· · · · · · · · · · · · · · · · · · ·		
		4			

	ialiLandsiReportings ection Form				OM	Form 481 3 Control No. 2013	3060-0986/0		No.: 3060-0819
		3.00			**July	2043			
<010>	Study Area Code	429025							
<015>	Study Area Name	Virgin Mobi	le USA LP						
<020>	Program Year	2014							
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M.				<u> </u>		4	
<035>	Contact Telephone Number - Number of person identified in data line		762-6107						
<039>	Contact Email Address - Email Address of person identified in data line	e <030> andy	.m.lancaster@sp	print.com				<u></u>	
<910>	Tribal Land(s) on which ETC Serves								
							72		
<920>	Tribal Government Engagement Obligation			· · · · · · · · · · · · · · · · · · ·					
			Name of Atta	ched Docume	ent (.pdf)				
	If your company serves Tribal lands, please select (Yes, No, NA) for								
	each these boxes to confirm the status described on the attached								
	PDF, on line 920, demonstrates coordination with the Tribal								
	government pursuant to § 54.313(a)(9) includes:								
		Select	٦						
		(Yes,No,							
		NA)							
<921>	Needs assessment and deployment planning with a focus on Tribal		=						
13217	community anchor institutions;		8						
<922>	Feasibility and sustainability planning;		38						
<923>	Marketing services in a culturally sensitive manner;	·	7						
<924>	Compliance with Rights of way processes		1						
<925>	Compliance with Land Use permitting requirements		┪						
<926>	Compliance with Facilities Siting rules		┪						
<927>	Compliance with Facilities Siting rules Compliance with Environmental Review processes		-						
		<u> </u>							
<928>	Compliance with Cultural Preservation review processes		-						
<929>	Compliance with Tribal Business and Licensing requirements.		_						
								A STATE OF THE STA	en e

1.5 / July 19 19 19 19 19 19 19 19 19 19 19 19 19	Terrestrial Backhaul Reporting ection Form	FCG Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	429025
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

1200) Te ifeline	rms and Condition for Lifeline Customers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
man and the second seco	ection Form	july2013
<010>	Study Area Code	429025
<015>		Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <030>	· · · · · · · · · · · · · · · · · · ·
-1210-	Towns 9. Constitutions of Volume Telephony Lifetime Diagram	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	lame of attached document (.pdf)
	JN	value of attached document (.pdf)
<1220>	Link to Public Website	http://www.assurancewireless.com/Public/TermsandConditions.aspx
	"Please check these boxes below to confirm that the attached PDF,	
	on line 1210, or the website listed, on line 1220,	
	contains the required information pursuant to §	
	54.422(a)(2) annual reporting for ETCs receiving low-income	
	support, carriers must annually report:	
<1221>	Information describing the terms and conditions of any voice	
	telephony service plans offered to Lifeline subscribers,	
	,	
<1222>	Details on the number of minutes provided as part of the plan,	
\1222 /	Details on the number of minutes provided as part of the plan,	
	and the second	
<1223>	Additional charges for toll calls, and rates for each such plan.	

(2000) Pr	ice Cap Carrier Additional Documentation.	FCCForm(481)
Data Coll	ection/Form	OMB control No. 3060-0986/OMB control No. 3060-0819
Water Control of the	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carrier	
meraumg	ntite-of-nettimediriessuffindred with mide-expected readingles contact	
<010>	Study Area Code	429025
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030	
<039>	Contact Email Address - Email Address of person identified in data line <03	0> andy.m.lancaster@sprint.com
~ 08M26480%080000000		
CHECK th	ne boxes below to note compliance as a recipient of Incremental Connect A	merica Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II
	support as set forth in 47 CFR § 54.313(b),(c),((d),(e) the information reported on this form and in the documents attached below is accurate.
	Incremental Connect America Phase I reporting	and the state of the
<2010>	2nd Year Certification {47 CFR § 54.313(b){1}}	
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))	
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312)	a))
<2012>	2013 Frozen Support Certification	-
<2013>	2014 Frozen Support Certification	
<2014>	2015 Frozen Support Certification	<u> </u>
<2015>	2016 and future Frozen Support Certification	<u> </u>
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))	
<2016>	Certification Support Used to Build Broadband	
		Unarround
	Connect America Phase II Reporting (47 CFR § 54.313(e))	
<2017>	3rd year Broadband Service Certification	
<2018>	5th year Broadband Service Certification	
<2019>	Interim Progress Certification	
<2020>	Please check the box to confirm that the attached PDF, on line 202	21,
	contains the required information pursuant to § 54.313 (e)(3)(ii), as	
	of CAF Phase II support shall provide the number, names, and addr	·
	community anchor institutions to which began providing access to	·
	service in the preceding calendar year.	
<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information
1		

	te Of Return Carrier Additional Documentation action Form		FCCFForm 481 OMB Control No. 3060 July 2013	D-0986/OMB Control No	73060-0819
			July 2013		
<010>	Study Area Code 429025				
<015>	7.	Mobile USA LP			
<020>	Program Year 2014				
<030> <035>	Contact Name - Person USAC should contact regarding this data Ar Contact Telephone Number - Number of person identified in data line <030>	913-762-6107			
<039>	Contact Ferephone Number - Number of person identified in data line <030>				
		5.14 y 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
series en arabigo			Constitution of the State of th	SE complete de la maria de maria de la completa de	ter aldress successive are the control
CHECK t	he boxes below to note compliance on its five year service quality plan (purs CFR § 54.313(f)(2). I further certify that	uant to 47 CFR § 54.202(a)) and, for privately held carriers, ensurin t the information reported on this form and in the documents attac		al reporting requirement	ts set forth in 47
	Progress Report on 5 Year Plan				
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i)) Please check this box to confirm that the attached PDF, on line 3012,	Name of Attached Document Listing Required Information			 }
(3011)	contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.				
(3012) (3013) (3014)	Community Anchor Institutions {47 CFR § 54.313{f}(1)(ii)} Is your company a Privately Held ROR Carrier {47 CFR § 54.313{f}(2)} If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313{f}(2) compliance requires:	Name of Attached Document Listing Required Information	(Yes/No) (Yes/No)		*
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)				
(3016)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows				
(3017) (3018)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation If the response is no on line 3014, is your company audited?	Name of Attached Document Listing Required Information	{Yes/No}		
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313 $\{f\}(2)$, contains				
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications PDF of Balance Sheet, Income Statement and Statement of Cash Flows				No.
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.				
(3022)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313{f}{2}, contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications				
(3023)	Borrowers, Underlying information subjected to a review by an independent certified public accountant				
(3024)	Underlying information subjected to an officer certification.				
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows				
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	-	-	<u></u>
				Service Services	

	tion - Reporting Carr ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	429025
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Pers	on USAC should contact regarding this data Andrew M. Lancaster
<035>	Contact Telephone N	umber - Number of person identified in data line <030> 913-762-6107
<039>	Contact Email Addre	ss - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

l certify that I am an officer of the reporting carrier; my responsibilities in recipients; and, to the best of my knowledge, the information reported of		· · · · · · · · · · · · · · · · · · ·	its for universal service support	4.
Name of Reporting Carrier: Virgin Mobile USA LP				i w
Signature of Authorized Officer: CERTIFIED ONLINE			Date 10/10/2013	1,79
Printed name of Authorized Officer: Jay Franklin		-		
Title or position of Authorized Officer: Assistant Controller				
Telephone number of Authorized Officer: 913 762-6107	No.		*	
Study Area Code of Reporting Carrier: 429025	Filing Due Date for this for	rm: 10/15/2013		

Certification - Agent / Carrier Data Collection Form	FCCForm 481 OMB Control No. 3060-0 July 2013	985/OMB Control No. (3050-0819
	· · · · · · · · · · · · · · · · · · ·	·

<010>	Study Area Code	429025		
<015>	Study Area Name	Virgin Mobile USA LP		
<020>	Program Year	2014		
<030>	30> Contact Name - Person USAC should contact regarding this data Andrew M. Lancaster			
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-762-6107			
<039>	Contact Email Address - Email Address of person identified in data line < 030> and y.m.lancaster@sprint.com			

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)	is authorized to submit the information rep ny responsibilities include ensuring the accuracy of the annual data reporting re I data provided to the authorized agent is accurate.	
Name of Authorized Agent:		
Name of Reporting Carrier:		
Signature of Authorized Officer:		Date:
Printed name of Authorized Officer:		
Title or position of Authorized Officer:		
Telephone number of Authorized Officer:	and the second s	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent A	Authorized to File Annual Reports for CAF or LI Recipient	s on Behalf of Reporting Carrier
	orized to submit the annual reports for universal service support re eporting carrier; and, to the best of my knowledge, the information	
Name of Reporting Carrier:		
Name of Authorized Agent or Employee of Agent:		
Signature of Authorized Agent or Employee of Agent:		Date:
Printed name of Authorized Agent or Employee of Agent:		
Title or position of Authorized Agent or Employee of Agent		
Felephone number of Authorized Agent or Employee of Ag	ent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

Attachments

<010>	Study Area Code	429025				
<015>	Study Area Name	Virgin Mobile	USA LP			
<020>	Program Year	2014				
<030>	Contact Name - Person USA	C should contact regarding this data Andrew M. La	ncaster			
<035>	5> Contact Telephone Number - Number of person identified in data line <030> 913-762-6107					
<039>	Contact Email Address - Em	ail Address of person identified in data line <030> andy.m.lan	caster@sprint.com			
<810>	Reporting Carrier	Virgin Mobile USA LP				
<811>	Holding Company	Sprint Corporation				
<812>	Operating Company					

≪at≥	<a2></a2>	<83>
Affiliates	SAC	Doing Business As Company or Brand Designation
Virgin Mobile USA LP	429025	Assurance Wireless

			ı	

100	m 481 - Carrier Annual Reporting Illection Form	FCC Form 451 OMB Control No. 3060-0986/ GMB Control No. 3060 11 July 2013	0819
<010>	Study Area Code	449061	
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2014	
<030>	Contact Name: Person USAC should contact with questions about this data	Andrew M. Lancaster	
<035>	Contact Telephone Number: Number of the person identified in data line <0302	913-762-6107 >	
<039>	Contact Email Address: Email of the person identified in data line <030>	andy.m.lancaster@sprint.com	
ĀÑŅUĀ	L-REPORTING FOR ALL CARRIERS	Gompletton Gorn Required Req	0 22 Hetlon Hired
<100>	Service Quality Improvement Reporting	(check box when comp (complete attached worksheet)	ete)
<200> <210>	Outage Reporting (voice)	(complete attached worksheet) no outages to report	7
<310>	Unfulfilled Service Requests (voice) Detail on Attempts (voice) Unfulfilled Service Requests (broadband) Detail on Attempts (broadband)	(attach descriptive document) (attach descriptive document)	
<400> <410> <420> <430> <440> <450>	Number of Complaints per 1,000 customers (voice Fixed Mobile 0.1112 Number of Complaints per 1,000 customers (broad Fixed Mobile		
<710> <800> <900> <1000> <1010> <11100> <11100>	Service Quality Standards & Consumer Protection (449061tx510) Functionality in Emergency Situations (449061tx610) Company Price Offerings (voice) Company Price Offerings (broadband) Operating Companies and Affiliates Tribal Land Offerings (Y/N)? Voice Services Rate Comparability Terrestrial Backhaul (Y/N)? Terms and Condition for Lifeline Customers	Rules Compliance (check to indicate certification) (attached descriptive document) (check to indicate certification) (attached descriptive document) (complete attached worksheet) (complete attached worksheet) (complete attached worksheet) (if yes, complete attached worksheet) (check to indicate certification) (attach descriptive document) (if not, check to indicate certification) (complete attached worksheet) (complete attached worksheet)	
<2000> <2005> <3000> <3005>	Price Cap Carriers, Proceed to <u>Price Cap Additional</u> Including Rate-of-Return Carriers affiliated with Pri Rate of Return Carriers, Proceed to <u>ROR Additional</u>	ice Cap Local Exchange Carriers (check to indicate certification) (complete attached worksheet)	

1988 T. A. SACKETT & 1997	rvice Quality Improvement Reporting llection Form		FCC Form 481: OMB Control No. 30 July 2013	60°0986/OMB Control No. 3060°0819
<010>	Study Area Gode 449061			
<015>	Study Area Name Virgin Mobi	le USA LP		
<020>	Program Year 2014			e de la Companya de l
<030>	contractification 1 ctsol/ op/in strength of the strength of t	ew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <030> 91			
<039>	Contact Email Address - Email Address of person identified in data line <030> at	ndy.m.lancaster@sprint.com		
<110>	Has your company received its ETC certification from the FCC?	(yes / no) O		
<111>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no) O		
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your cor CETC which only receives frozen support, your progress report is only required to address voice telephony service.	npany is a		
	Please check these boxes below to confirm that the attached PDF, on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	Name of Attach	ned Document (.pdf)	
<113> <114> <115> <116> <117> <118>	Maps detailing progress towards meeting plan targets Report how much universal service (USF) support was received How (USF) was used to improve service quality How (USF) was used to improve service coverage How (USF) was used to improve service capacity Provide an explanation of network improvement targets not met in the prior calendar year.			

(200) Service Outage Reporting (Voice)

Data Collection Form

OMB Control No. 3060-0819

Suly 2013

<010>	Study Area Code	449061					
<015>	Study Area Name	Virgin Mobile USA LP					
<020>	Program Year	2014					
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster					
<035>	5> Contact Telephone Number - Number of person identified in data line <030> 913-762-6107						
<039>	<039> Contact Email Address - Email Address of person identified in data line <030> andy m. lancaster@sprint.com						

<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d>></d>	<e></e>	<f></f>	<g>.</g>	<h>></h>
NORS Reference Number		Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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AND MARKS TO AND ADDRESS OF	ce Offerings including Völce Rate Data lection Form			IFCC Form 481 OMB Control No. 3060 0 July 2013	986/OMB Cöntföl No. 3060-0819
and the second second		· · · · · · · · · · · · · · · · · · ·		3701A 570423	
<010>	Study Area Code	449061			
<015>	Study Area Name	Virgin Mobile USA LP			
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	,		
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107		<u> </u>	
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com			
<701>	Residential Local Service Charge Effective Date 1/1/2013				
Z7025	Single State wide Peridential Local Service Charge				

State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
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							4.00	
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	<u> </u>							
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				See att	ached worksheet	i i i i i i i i i i i i i i i i i i i		
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5 6 5 6 6 6								

(710):Broadband Price Offerings Data Collection Form	#FCCForm 4810 OMB(control(No. 3060 0986/OMB,control(No. 3060 0819
	00ly/2013)
<010> Study Area Code	449061
<015> Study Area Name	Virgin Mobile USA LP
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster

913-762-6107

<035> Contact Telephone Number - Number of person identified in data line <030>

<039> Contact Email Address - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com

<711>	<a15< th=""><th><a2> ***</a2></th><th><b1></b1></th><th> 602>"</th><th>(cof</th><th><d1></d1></th><th><d2></d2></th><th>. ₹d3></th><th>/<d4></d4></th></a15<>	<a2> ***</a2>	<b1></b1>	 602>"	(cof	<d1></d1>	<d2></d2>	. ₹d3>	/ <d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (<i>select</i>)
								- · · · · · · · · · · · · · · · · · · ·	
				11					
								<u>- </u>	
			00	e attached			<u> </u>		
		<u>San Sangara nga sana sana sana sana sana sana sana</u>		sheet					
			VVIA					and the second s	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
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	-								
		<u> </u>							

<010>	Study Area Code	449061		
<015>	Study Area Name	Virgin Mobile USA LP		
<020>	Program Year	2014		
<030>	0> Contact Name - Person USAC should contact regarding this data Andrew M. Lancaster			
<035>	Contact Telephone Number - Number of person identified in data line <030> 913-762-6107			
<039>	> Contact Email Address - Email Address of person identified in data line <030> andy m.lancaster@sprint.com			
<810>	Reporting Carrier Virgin Mobile USA LP			
<811>	Holding Company Sprint Corporation			
<812>	Operating Company			

See attached worksheet	Affiliates	SAC	Doing Business As Company or Brand Designation
	See a	ttached works	heet
		:	

	allLandsReporting ectionForm	FGC Form 481 OMB Control Nov 3060-0986/OMB Control Nov 3060-0819
		July 2013
<010>	Study Area Code	449061
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line	
<039>	Contact Email Address - Email Address of person identified in data line	e <030> andy.m.lancaster@sprint.com
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	
		Name of Attached Document (.pdf)
	If your company serves Tribal lands, please select (Yes,No, NA) for	
	each these boxes to confirm the status described on the attached	
	PDF, on line 920, demonstrates coordination with the Tribal	
	government pursuant to § 54.313(a)(9) includes:	
		Select
		(Yes,No,
		NA)
<921>	Needs assessment and deployment planning with a focus on Tribal	
/321/	community anchor institutions;	
<922>	Feasibility and sustainability planning;	
<923>	Marketing services in a culturally sensitive manner;	
<924>	Compliance with Rights of way processes	
<925>	Compliance with Land Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

CONTRACTOR CONTRACTOR) Terrestrial Backhaul Reporting ection Form	FGG-Form 481 OMB Control Not 3060-0986/OMB Control Not 3060-0819 July 2013
040		449061
<010>	Study Area Code	
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster
<035>	Contact Telephone Number - Number of person identified in data line <030>	913-762-6107
<039>	Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com
<1120>	Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)	
<1130>	Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G)	

(1200) Te	rms and Condition for Lifeline Customers	market and the second s	FCC Form 48	1	A WEST
Lifeline			OMB Contro	No. 3060:0986/0MB 0	ontrol No: 3060-0819
Data Coll	ection Form		July 2013		
<010>	Study Area Code	449061			
<015>	Study Area Name	Virgin Mobile USA LP			
<020>	Program Year	2014			
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster			
<035>	Contact Telephone Number - Number of person identified in data lin	913-762-6107			
<039>	Contact Email Address - Email Address of person identified in data lin	e <030> andy m.lancaster@sprint	. com		
4040	T 0 0 10 10 10 10 10 10 10 10 10 10 10 10				
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		. ((0)		
		Name of attached document	t (.pdf)		
<1220>	Link to Public Website	HTTPhttp://www.assurancewireles	ss.com/Public/TermsandCor	ditions.aspx	
	"Please check these boxes below to confirm that the attached PDF,				
	on line 1210, or the website listed, on line 1220,				
	contains the required information pursuant to §				
	54.422(a)(2) annual reporting for ETCs receiving low-income				
	support, carriers must annually report:				
-1221	Information describing the terms and conditions of any voice	 1			
<1221>	telephony service plans offered to Lifeline subscribers,	. ✓ .			
	telephony service plans offered to Lifetine subscribers,				
					
<1222>	Details on the number of minutes provided as part of the plan,				
<1223>	Additional charges for toll calls, and rates for each such plan.	<u>िय</u> ा			
71667	Additional charges to ton cans, and fates for each such plan.	[#/V]]			

SECTION AND ADDRESS.	ice Cap Carrier Additional Documentation	And the second second second second	FGC Form 484)
100000000000000000000000000000000000000	ection Form a		OMB Control No. 3060-0985/ OMB Control No. 3060-0819
Including	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carrier.		And the second s
<010>	Study Area Code	449061	
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2014	·
<030>	Contact Name - Person USAC should contact regarding this data	Andrew M. Lancaster	
<035>	Contact Telephone Number - Number of person identified in data line <030	> 913-762-6107	
<039>	Contact Email Address - Email Address of person identified in data line <030	> andy.m.lancaster@sprint.com	
	he boxes below to note compliance as a recipient of incremental Connect Ar support as set forth in 47 CFR § 54.313(b),(c),(t access charge reductions, and Connect America Phase II
-2010-	Incremental Connect America Phase I reporting		
<2010> <2011>	2nd Year Certification (47 CFR § 54.313(b)(1))		
<2011>	3rd Year Certification (47 CFR § 54.313(b)(2))		
	Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312()}	
<2012>	2013 Frozen Support Certification		
<2013>	2014 Frozen Support Certification		·
<2014>	2015 Frozen Support Certification		
<2015>	2016 and future Frozen Support Certification		
	Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))		
<2016>	Certification Support Used to Build Broadband		
	Connect America Phase II Reporting {47 CFR § 54.313(e)}		
<2017>	3rd year Broadband Service Certification		
<2018>	5th year Broadband Service Certification		
<2019>	Interim Progress Certification		·
<2020>	Please check the box to confirm that the attached PDF, on line 202	1,	
	contains the required information pursuant to § 54.313 (e)(3)(ii), as	a recipient	
	of CAF Phase II support shall provide the number, names, and addr	esses of	
	community anchor institutions to which began providing access to		
	service in the preceding calendar year.		
<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information	

1000	te Of Return Carrier/Additional Documentation		FCCForm/481 OMB Control No. 3060-05 JUN 2013Y	86/OMB Controllin	51 3060-0819
- <010>	Study Area Code 44 9061				
<015>		obile USA LP			- %
<020>	Program Year 2014				
<030>		Prew M. Lancaster 913-762-6107			
<035>	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	andy.m.lancaster@sprint.com			
saanantinia	he boxes below to note compliance on its five year service quality plan (pursus CFR § 54.313(f)2). I further certify that (tt. Lindskieren trouge kannet kolonistikus in soon een sell siiden til soon til soon te soon til soon til soon	compliance with the financial r		its set forth in 47
	Progress Report on 5 Year Plan				
(3010)	Milestone Certification (47 CFR § 54.313(f)(1)(i))	Name of Attached Document Listing Required Information		<u> </u>	
(3011)	Please check this box to confirm that the attached PDF, on line 3012, contains the required information pursuant to § 54.313 (f)(1)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.				
(3012) (3013) (3014)	Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) If yes, does your company file the RUS annual report Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for	Name of Attached Document Listing Required Information	(Yes/No) (Yes/No)		
(3015)	Telecommunications Borrowers) PDF of Balance Sheet, Income Statement and Statement of Cash Flows				
(3017) (3018)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation If the response is no on line 3014, is your company audited?	Name of Attached Document Listing Required Information	(Yes/No)	· · · · · · · · · · · · · · · · · · ·	1, 14, <u>2, </u> 8
	If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313{f}{2}, contains				
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications				
(3020)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows				
(3021)	Management letter issued by the independent certified public accountant that performed the company's financial audit.				
(3022) (3023) (3024)	If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers. Underlying information subjected to a review by an independent certified public accountant.				
	Underlying information subjected to an officer certification.				
(3025)	PDF of Balance Sheet, Income Statement and Statement of Cash Flows	;			
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	- -		

2000E200E20FEFEE	ion - Reporting Car ection Form	ler FCC-Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 5 July 2013
<010>	Study Area Code	449061
<015>	Study Area Name	Virgin Mobile USA LP
<020>	Program Year	2014
<030>	Contact Name - Pers	on USAC should contact regarding this data Andrew M. Lancaster
<035>	Contact Telephone N	Number - Number of person identified in data line <030> 913 - 762 - 6107
<039>	Contact Email Addre	ss - Email Address of person identified in data line <030> andy.m.lancaster@sprint.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

449061

Study Area Code of Reporting Carrier:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Virgin Mobile USA LP Signature of Authorized Officer: CERTIFIED ONLINE Date 10/10/2013 Printed name of Authorized Officer: Jay Franklin Title or position of Authorized Officer: Assistant Controller Telephone number of Authorized Officer: 913 762-6107

Filing Due Date for this form:

10/15/2013

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier	FCG Form 481.
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	449061	
<015>	Study Area Name	Virgin Mobile USA LP	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data Andrew M. Lancaster		
<035>	Contact Telephone Number - Number of person identified in data line <030> 913 -762 -6107		
<039>	Contact Email Address - Email Address of person identified in data line <030> and y.m.lancaster@sprint.com		

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate. Name of Reporting Carrier: Name of Authorized Agent or Employee of Agent: Signature of Authorized Agent or Employee of Agent: Date: Printed name of Authorized Agent or Employee of Agent Title or position of Authorized Agent or Employee of Agent Telephone number of Authorized Agent or Employee of Agent: Study Area Code of Reporting Carrier: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001

Attachments